**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZATION		
i Oitim i	(See instructions)		Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typying, type over the lines	12FE4M5	
C. R. Bard Inc.	Active Citizenship Committee		
ADDRESS (number and s	rtreet) 730 Central Avenue		
(Check if address is changed)			
	Murray Hill	MJ	07974   _
	CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)		
(Check if address is changed)	pacs@pass1.com		
COMMITTEE'S WER I	PAGE ADDRESS (URL)		
(Check if address is changed)	n/a		
2. DATE 0.3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICATION	TION NUMBER C C00359125		
4. IS THIS STATEM	ENT NEW (N) OR X AMENDED (A)		
L certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correct	and complete	
Type or Print Name of	Treasurer Scott Lowry		
Signature of Treasurer	Electronically Filed by Scott Lowry	Date 03	/ <b>27</b> / <b>2009</b>
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing this S  ANY CHANGE IN INFORMATION SHOULD BE REPORTE		
Office	For further information		
Use Only	Federal Election Comm Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2009)